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No. 0075 P. 1

MAR 1.4 2007



## **GRACE HEALTHCARE**

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TELEPHONE: 828-580-5000
FAX: 828-580-6039 - PATIENT FINANCIAL SERVICES
FAX: 828-580-6859 - MEDICAL RECORDS

à MR. DANton Demille. Thanks once again.

FACSIMILE TRANSMISSION COVER SHEET FOR MEDICAL RECORDS

DATE/TIME: 3/14/07
TO: United States Patent+ FAX NUMBER: (571)- 273-8300 HEALTHCARE PROVIDER/FACILITY:
FROM: GRACE HOSPITAL- MEDICAL RECORD DEPARTMENT
FAXED BY: Shirley Benson Number of pages (including cover sheet): (3)  Call (828) 580-6887 if you did not receive all pages of this fax.
PATIENT INFORMATION
Patient Name: Date of Birth:
Medical Record Number:
Written patient authorization received prior to transmission? [] yes [] no If no, reason: [] Physician request for record (Grace Hospital physicians only) [] Other:
Information Sent: (circle specific portions of record released) DS, H&P, Op note, path report, face sheet, ER report, x-ray, labs, EKGs, progress notes, other:
RECIPIENT
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	Application Number	10/429,996	
TRANSMITTAL	Filing Date	10/42/11/10	
FORM	First Named Inventor	Shirley Benson	
1 3.00	Art Unit	2011/Ed (2011/2011	
<i>(</i> -1	Examiner Name	DANton Demille	
(to be use 1 for all correspondence after initial filling)	Attorney Docket Number	DAITTON DETITIE	
Total Num: 6: of Pages in This Submission		······································	
ENCLOSURES (Check all that apply)			
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Fee Attached	Licensing-related Papers	Appeal Communication to Board of Appeals and Interferences	
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'After Final	Provisional Application	Proprietary Information	
Affidavits/declaration(s)	Power of Attorney, Revocation Change of Correspondence Ar	Idress Status Letter	
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Shirley Benson Red, No.			
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This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is defined to 2 hours to complete, including gathering, proteining, and submitting the completed application form to the USPTO. Time will vary depending the think industrial case. Any comments on the amount of time the require to complete this form and/or suggestions for reducing this burden, should be sent to be Chief Information Officer, U.S. Department of Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SECONDELETED FORMS TO THIS ADDRESS, SECONDELETED FORMS TO THIS ADDRESS.

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## Remarks

Applicant notes that as we discussed in our telephone confrence each one of the references cited by the Examiner discloses an exercise device and only works the abdominal muscle. Except Freyman which is clearly for stabilization. In the field of medicine as we discussed we can no longer tie patients down not even for their own safety without a doctors order. So even his device would be considered obsolete. Freymans device would still cause the patient to push in their face and not in their peineum or rectal area where it is needed to help with delivery. Please reconsider that the wording has been changed to fit what the rope actually does and that the loops aren't for anything except to keep me as a nurse to keep from handing it to my patient a hundred and fifty times. I am sending you a drawing that I give to some of the mothers in our child birth classes that wish to try the rope to better understand where her hands go. Please reconsider my patent. It simply redirects their pushing efforts. No New matter has been added the wording from abdomin to perineal and rectal areas have been changed. Thank you for your time.

Shirley Benson R.N.